DOCUMENT RESUME

ED 293 232 EC 202 081

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TITLE Breeding Poverty? Great Issues Lecture.
PUB DATE 6 Oct 87
NOTE 18p.; Invited lecture, Utah State University Great Issues Series (Logan, UT, October 6, 1987).
PUB TYPE Viewpoints (120) -- Speeches/Conference Papers (150)

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS Adjustment (to Environment); Advocacy; Birth Rate; Contraception; Counseling; Cultural Background; Economically Disadvantaged; Family Environment; *Family Influence; *Family Planning; *Government Role; Heredity; Individual Needs; *Mental Retardation; Population Growth; Poverty; *Public Policy; Social Action; Social Services; Socioeconomic Influences

ABSTRACT

People classified as "cultural familial retarded" form a segment of the U.S. population that is easily overlooked by society, yet constitutes a growing problem. Individuals with this inherited form of mental retardation (estimated to number in excess of 5 million) are reared in a culturally inferior milieu and have a need for life-long social support. The cultural familial retarded have no advocates to spontaneously champion their cause as other handicapping conditions do. This segment of the population is growing at a rate three to four times as fast as the general population. A three-point plan is proposed: (1) Government must become advocates of the cultural familial retarded, and must recognize them as individuals who are permanently locked in the grip of poverty and intellectual inability. (2) Society must come to grips with the uncomfortable topic of birth control in situations where the procreators are intellectually incapable of making rational decisions which are in their best interests and in the best interest of society. (3) New focus should be given to counseling the cultural familial retarded to help them fend better in society and to help them delay, control, and terminate the procreative process to achieve a more manageable family situation. (JDD)

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Great Issues Lecture

Breeding Poverty?

By

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October 6, 1987

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About twelve percent (12%) of our population (29, 218, 879)* deviates so significantly from the norm as to be classified as exceptional in some way: exceptionally able or exceptionally unable (Heward and Orlansky, 1980, p. 4). (Not included in this number are disabling conditions that are incident to age.)

Of this twelve percent (12%), about two and a half percent (2.5%) are mentally retarded (Heward and Orlansky, p. 4), or about 6,087,475 people. Of these, an estimated eighty-five (85%), or about 5,174,354 are cultural familial retarded (Brenda, et al., 1963, p. 28). These are the objects of my remarks today.

EC 203081

*As of August 18, 1987, there were 243, 498, 994 resident citizens of the U.S. (Commerce Publication Update, Vol. 18, No. 6, September 4, 1987, p. 5.)

My concern for and about this subset of our populations is that its members are so easily overlooked by society, yet from the standpoint of social responsibility, they constitute a growing problem -- both literally and figuratively.

As with people who are average and above average intelligence, cultural familial retardation is transmitted through the genes, and those who inherit those genes are able to pass the retardation along to their children. It is an inherited form of mental retardation that can be transmitted genetically from one generation to another. A cultural familial retardate is one:

1. who is mildly mentally retarded, with an I.Q. between fifty to seventy (given a five point standard measurement error) as measured by an individually administered, standardized intelligence test such as the Stanford Binet,

2. has no pathological damage which would account for this level of functioning, and

3. has a least one parent who exhibits these same characteristics.

In addition to these personal characteristics are two social characteristics peculiar to the cultural familial retarded:

1. such individuals are born into, and reared in, a culturally inferior milieu, and
2. they represent a disproportionately large part of the case load of social agencies (Blatt, 1981, Page 75).

Were you to meet a culturally familial retardate on the street, in the supermarket, at a civic center, that is in society generally, you would be hard pressed to recognize that person as retarded. Infant and preschool cultural familial retardates exhibit behaviors which make them essentially non recognizable as retarded (Blatt, 1981, Page 230). Hence, they are easily overlooked as members of our society who have an inordinately great need for life-long social support. I emphasize life-long social support since these individuals come from families which are unable -- due to their

own lack of intellectual ability -- to provide their children with the support that they need to acquire and maintain a reasonable standard of living. Norman Bernstein, in a book entitled Diminished People, describes the milieu of the cultural familial retardate:

> "Within their own ghetto subculture the people of such a community ("culturally asynchronic") move from infancy to maturity with demonstrated adaptability across language and social - interactive dimensions. However, as they enter the "other world" of the schools and middle class society, they are unprepared and unable to interact on a multi dimensional level. In these new settings, they are failures. Because such failures are so frequent in these communities, a great many families appear to be "defective families", rather than simply disadvantaged individuals living in a "defective community" (Page 23).

Burton Blatt, in his book In and Out of Mental Retardation, provides a graphic case study to illustrate the plight of a cultural familial retarded

family:

The family lives in a congested section of the city comprising two large low-income housing projects and severely run-down tenement dwellings. They live in a building that was condemned several years ago but never demolished. Many families move to this block as a last resort when they are evicted from the housing project. In this neighborhood it is considered degrading to have to live on this block.

The building they live in is in deplorable physical condition, dirty, and an apparent firetrap. Stairways are broken and garbage is strewn on all floors. Stairways and hallways are dark, their only light coming through a skylight during the day. Obscene messages are written on the walls of the hallways. The entire house smells of kerosene, which is the only type of heating available. The ceilings are cracked and plaster is falling down. The house is infested with rats, which seem to be a continuous

problem to the tenants. No door has a name or number on it and mail boxes do not indicate which apartment contains which family. Most people in the house pick up their mail at the Post Office, as most mail is in the form of relief or other dependency checks and it is not a good idea to rely upon the broken boxes from which mail can be easily stolen. This obscurity helps in avoiding creditors as well as other unwanted visitors.

The apartment has no name on the front door. It is dirty and smells much worse than the hallways. There are three bedrooms, a combination bedroom-living room, a kitchen, and a bathroom. All the furniture is in disrepair and the physical surroundings appear to be grossly neglected.

The family is known to eleven social agencies.

The father, who is 40 years old, reported that he had completed seven grades of school, is not working, and presently is being

treated at the Veterans Administration Hospital. Prior to his hospitalization he was an odd-job worker. He is said to be an alcoholic. The mother, who is 37 years old, reported that she stayed back a lot in school and did not like school but completed seven grades. There are eight children in this family, six of school age. The 14-year-old son is in fifth grade, the 12-year-old daughter is in sixth grade, the 11-year-old daughter is in third grade, the 8-year-old daughter is in first grade, and the 7-year-old daughter and 6-year-old son are in kindergarten. There is evidence here of general and multiple grade repetition among siblings. (Pages 48 - 49).

By contrast, the vast majority of people who prosper in our society do so primarily because of the support they receive from their families. Dr. James Coleman, a renown sociologist at the University of Chicago, demonstrated this in his famous Coleman study of 1966 in which he found that the only variable which correlated significantly with school achievement (or lack of it) was home background. Most of those who are enrolled at this

university, who persist in their studies, move into adult life and assume responsible, independent, productive roles in society do so in a large measure because of parental and family encouragement, modeling, and/or support. As we have seen in the descriptions that I have just read, these are lacking, for the most part, in the lives of the cultural familial retarded. Consequently, having low mental ability, exacerbated by a lack of parental encouragement, support, and proper modeling, the cultural familial retarded settle permanently into the lowest of the lower socio-economic strata of society, become life-long clients of welfare programs, drift from job to job, are easily exploited, and reproduce an inordinately large posterity that will perpetuate this grim circumstance; hence, the title of this presentation: "Breeding poverty?"

Life-long social support systems exist to serve most handicapping conditions: the blind and visually impaired, the deaf and hard of hearing, the orthopedically handicapped, and so on. Members of these populations, though handicapped, are nevertheless able to speak for themselves, to organize, to establish institutions that serve their needs, to form powerful

political action groups, to generate money to push forward their causes, to marshall strong family support, and to procreate able offspring who can promote the causes of their parents. Middle and upper class families of the mentally retarded serve the same function for their children.

This is not the case for the cultural familial retarded. They become a voiceless, faceless mass far from the mainstreaming of society, either shunned entirely, or becoming the objects of benign neglect. And for individuals and action groups to spontaneously champion the cause of this mass is extremely unlikely because the rewards that come from serving this population are so few and so tenuous that they simply are not sufficient to sustain the intense and long term efforts that are necessary. There are simply too few Mother Theresa's available. Even individuals who have been specially educated and trained to address complex social problems are repelled by the thought of entering stinking, rat infested, dilapidated homes to deliver services. It's repulsive. It's punishing. And behaviors which are punished or which go unrewarded are behaviors which grow weaker and weaker.

With this population, breeding more of the same takes on special significance. Child bearing women in this social strata begin bearing children at an earlier age than is the case with women generally. Typically, they have their first child in the early to mid teenage years prior to marriage. Their children are generally not attractive to adoption agencies and potential adoptive parents, so they remain in the family in which they are born. These mothers continue to bear children over a longer number of years, often with multiple partners. Marriage may be of little consequence. Poor maternal care, increased incidence of disease and high infant mortality rates are characteristics which are familiar in this setting, not to mention the subsequent problems related to poor health and emotional instability. Though precise data are difficult to obtain, it appears that cultural familial retarded mothers produce easily three to four times as many children as do mothers generally (presently, the average number of children per family is 1.8 Weller and Bouvier, page 59). The situation, though deplorable, is predictable: large numbers of children born into nonfunctional families and dependant for life on social agency

support. It has been this way for generations, and will continue this way for generations to come. And as I mentioned earlier, this problem population is growing at a rate three to four times as fast as is the population of problem solvers.

The question, therefore, is "What do we do about it?" Forget genocide. That is an option available only to barbarians. So what humane solution exist? I propose a three point plan.

President Lyndon Johnson's war on poverty was a nobel effort, not without its successes. Because of it, thousands -- perhaps hundreds of thousands, of people were able to break free from the grip of poverty and move into middle class society because they had acquired a new set of functional skills. But remember, the cultural familial retarded comprise not only a subculture of society generally, but it is a subculture within the subculture of poverty. They were almost untouched by the war on poverty in the sense of being able to put the life of poverty behind them since they were unable, because of their intellectual deficits, to acquire the skills

necessary to obtain and sustain a higher standard of living. At best, cultural familial retardated adults operate at a mental age of between 11 and 12 years; an ability which is simply not sufficient to manage successfully as parents -- or as individuals -- in the complex, multi dimensional world that we live in (Nakau, page 35). Arthur Jensen (1969) observed that "there is no doubt that moving children from an extremely deprived environment to good environmental circumstances can boost the I.Q. 20 to 30 points, and in some extremely rare cases as much as 60 to 70 points." This possibility, however, is reserved for those who are only culturally and socially impoverished. To date, there are no data to support the thesis that such remarkable gains can be realized with cultural familial retardates -- anymore than it is possible through enriching the environment and providing what Jensen calls "extreme experimental isolation", to turn a man of my size into an NFL lineman. The genes just aren't there!

So, unfortunately -- and discouragingly -- simply providing additional education, training, and cultural enrichment are not enough. Such people will, for as long as they live, require the support of a more able society.

This being so, and this is my first point, government must become their advocates, and must, when setting policy, distinguish between the needs and the potential of the poor who have the ability to rise above their circumstances and sustain that rise independently, and the poor who are permanently locked in the grip of poverty and intellectual inability. Some social scientists contend that making this distinction is meaningless (Bernstein, page 24). I disagree since the implications for public policy, educational and social strategies, and realistic goals are so great. Some argue that too little is known about this classification; that more research is needed. I agree that more research is needed, as is the case with all social ventures. I disagree that too little is known. This syndrome has been studied since the turn of the century when Goddard began his classic study of the Kallikak family. We probably know more about the cultural familial retarded than any other classification of mental retardation, but we hear so little of it today, in fact, progressively less and less, even at the University level. I propose three reasons for why this is so: first, it is terribly unpopular to suggest that an entire subset of society is, as noted by Heber (page 40), "invariably" retarded.

It sounds cold, heartless, and unreasonably terminal. It carries with it from the outset the dull and uninspiring thud of hopelessness. Secondly, this being so, society's helpers feel unrewarded and uninspired, hence, even unwilling to spend their talent and training and ability into something that seems so futureless. And third, there are no pressure groups speaking out in behalf of such people. Their voiceless cries for help are simply not heard. They look too normal. "They just must be shiftless", is the thought that passes though peoples minds. "If they'd only get out and make something of themselves!"

For these people to enjoy a decent, humane standard of living and quality of life, society must provide them with what Ogden Lindsley** calls a "prosthetic environment", that is, an environment in which there will always be support systems that help compensate for an "invariable" lack of ability.

Second, society needs to come to grips with the uncomfortable topic of birth control in situations where the procreators are intellectually incapable of

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making rational decisions which are in their best interest, and in the best interest of society; birth control that almost certainly requires that serious consideration be given to sterilization. I do not propose mass sterilization. I agree with Kolb (page 323) who said, "Sterilization as a general policy is a superficial method of approaching the problem of feeblemindedness." To date, the best work that I have seen on this sensitive issue is that of Sherlock and Sherlock in an article entitled, "Sterilizing the retarded: Consitutional, statutory, and policy alternatives." Proposed here is a five point procedure to guide decision making, a procedure which delicately balance the rights of the individual with the needs of society -- including the needs of the potential offspring who would become lifelong dependent members of that subset of society. Conley (1978) calculated that if all social strata had the same number of retarded persons as do the two highest strata. There would be 1,200,000 Mentally Retarded people rather than the 6,000,000 (p. 53).

And third, I propose that new focus be given to counseling the cultural familial retarded, counseling which serves two ends: (1) to help the

cultural familial retarded fend better, more proactively, in society, and (2) to help the cultural familial retarded delay, control, and terminate the procreative process to achieve a more manageable family situation. Counseling would need to be very personnel, explicit, and instructive, always keeping in mind that regardless of the clients size, chronological age, and outward appearance of normalcy, the learner within is but a child, and will always be a child.

I believe that the issue that I have addressed here is, indeed, a great issue, a great human issue; but not so great an issue to discuss as it is a problem for society to solve.

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